

Incident Report

Print Date/Time: 01/06/2016 11:06

Login ID: ss0137 Lake Stevens Police Department

ORI Number: WA0311900

Incident: 2016-00000169

Incident Date/Time: 1/3/2016 7:39:00 PM

Location: 717 SR 9 NE

LAKE STEVENS WA 98258

Phone Number:

LE Case Number:

Report Required: No **Prior Hazards:**

No

Venue: Lake Stevens

Source: Officer-Initiated

Traffic

Priority: 3 3 Status:

Incident Type:

Nature of Call:

Unit/Personnel

Unit Personnel SS0127-Adams 19N2

Person(s)

No. Role Name Address Phone Race Sex DOB

Vehicle(s)

Role Туре Year Make Model Color License State

Involved Vehicle Passenger Car AUD3560

Disposition(s)

Disposition Count

S

Property

Date Code Type Make Model Description Tag No. Item No.

	STATE OF WASHINGTON POLICE TRAFFIC COLLISION REPORT NO. E502208	1 0 4 27													
	INTERSTATE CITY STREET CITY ST	2													
1 4	STATE ROUTE OTHER STOLEN VEHICLE CODING CODING	3													
2 4	TRIBAL RESERVATION TOTAL # OF UNITS OBJECT STRUCK	0 4 28													
3 2	M M D D Y Y Y Y TIME (2400) COUNTY# MILES CITY#	2													
	COLLISION 01 - 04 - 2016 0715 31 S W OF 0664	3													
4	ON (PRIMARY TRAFFIC WAY) INTERSECTION NON-INTERSECTION BLOCK NO. 2000	0 1 29													
4a	DISTANCE OF (REFERENCE OR CROSS STREET)														
5	75 00 MILES N E 20TH ST SE FEET S S W W														
	UNIT 01 MOTOR PEDAL- CYCLE DAMAGE THRESHOLD MET PHONE D: 4257506440														
6	LAST NAME MUTHIORA FIRST NAME PETER MIDDLE INITIAL K														
	STREET NEW ADDRESS 119 91ST AVE SE APT 3A														
7	CITY LAKE STEVENS ST WA ZIP 982583395	1 1 2 31													
8	CDL RESTRICTIONS ENDORSEMENTS	2													
9 9	DRIVER'S LICENSE # MUTHIPK235OA STATE WA SEX M D.O.B. MMDDYYYY 09 _ 01 _ 1977	3													
10 9	ON DUTY STATUS AIRBAG 2 RESTR. 4 EJECT 1 HELMET USE INJURY 1 NATURE OF INJURIES	1 2 32													
11 3 0	LICENSE PLATE # 224ZNJ WA VIN# 1NXBU40E29Z058371	2													
12 3 0	TRAILER PLATE # STATE TRAILER PLATE # STATE	3													
13 4	VEH. YEAR 2009 MAKE TOYT MODEL COR4D STYLE 4D VEHICLE TOWED YES NO TOWED BY REGISTERED OWNER INFO. PETER MUTHIORA 7606 34TH ST NE MARYSVILLE WA 98270 VEHICLE TOWED TOWED BY VEHICLE TOWED BY VEHI	5 1 33													
14 4	SHADE IN DAMAGED AREA LIABILITY INSURANCE INSURANCE CO & POLICY # NEFFECT N POLICY # N TOP N TOP N TOP N TOP N	FROM TO 34													
15 2	LEGICLE VEST NO CITATION # CHARGE														
16 2	UNIT 02 VEHICLE VEHICLE CYCLE PEDESTRIAN OWNER YES NO D: 4257609281	4 35													
	LAST NAME SCHRADER FIRST NAME JACOB MIDDLE P	37													
17	STREET NEW ADDRESS 6227 92ND AVE NE	38													
18	CITY LAKE STEVENS ST WA ZIP 982584002	39													
19	CDL RESTRICTIONS ENDORSEMENTS	40													
20	DRIVER'S LICENSE # SCHRAJP073MN SEX M D.O.B. MMDDYYYY 07 - 15 - 1993														
21	ON DUTY STATUS AIRBAG 2 RESTR. 4 EJECT 1 HELMET USE INJURY 1 CLASS 1														
22	LICENSE PLATE # APR5514 STATE WA VIN# JTDDY32T3Y0008401														
23	TRAILER PLATE # STATE TRAILER PLATE # STATE	1 41													
24	VEH. YEAR 2000 MAKE TOYT MODEL CEL 3D STYLE 2L VEHICLE TOWED BY REGISTERED OWNER INFO. PAUL CHAVEZ 8324 5TH ST SE LAKE STEVENS WA 98258	1 42													
	SHADE IN DAMAGED AREA LIABILITY INSURANCE CO GEICO 4097-40-17-82	_													
25	VEHICLE YES NO CITATION # CHARGE														
26	OFFICER'S NAME (PRINT) BADGE OR ID # 0075 AGENCY WA0311900														
	PART A 3000-345-159 R (7/06)														





CORRECTION

CASE #

REPORT NO.

E502208

91	972	

16-000169

ADDITIONAL PERSONS INVOLVE	D (PASSENGERS AND/OR WITNESSES ONLY)									
NAME (LAST, FIRST, MIDDLE INITIAL)										
ADDRESS & PHONE #	SEX D.O.B									
PASSENGER WITNESS UNIT # SEAT POS. AIRBAG	RESTR. EJECT HELMET INJURY CLASS NATURE OF INJURIES									
NAME (LAST, FIRST, MIDDLE INITIAL)										
ADDRESS & PHONE #	SEX D.O.B. MMDDYYYY									
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NAME (LAST, FIRST, MIDDLE INITIAL)										
ADDRESS & PHONE #	SEX D.O.B									
PASSENGER WITNESS UNIT # SEAT POS. AIRBAG	RESTR. EJECT HELMET USE CLASS NATURE OF INJURIES									
NA	ARRATIVE									
Unit 3 was stopped, waiting for traffic to proceed forward. Unit 2 came up behind Unit 3 and was unable to slow down due to ice on the roadway. Unit 2 moved right to aviod hitting Unit 3. Unit 1 also could not slow down due to ice on the roadway and hit Unit 2, forcing Unit 2 into Unit 3. There were no reported injuries and all vehicles were driven from the location.										
CERTIFY (DECLARE) UNDER PENALTY OF PERJURY UNDER THE LAWS OF THE STATE	E OF WASHINGTON THAT THE FOREGOING IS TRUE AND CORRECT. (RCW 9A.72.085)									
C. CHRISTENSEN NVESTIGATING OFFICER'S SIGNATURE UNIT OR DIST. DET	01-04-16 08:59 AM PLACE SIGNED									
APPROVED BY BOB SUMMERS 0079	DATE 1/5/2016 9:56:39 PM									
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